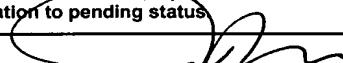


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TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A SUBMISSION UNDER 35 U.S.C. 371		ATTORNEY'S DOCKET NUMBER 08228/068001 U.S. APPLICATION NO. (If known, see 37 CFR 1.5) 10/518148
INTERNATIONAL APPLICATION NO. PCT/JP2004/005475	INTERNATIONAL FILING DATE 16 April 2004	PRIORITY DATE CLAIMED 16 April 2004
TITLE OF INVENTION GALLIUM-NITRIDE-BASED LIGHT-EMITTING APPARATUS		
APPLICANT(S) FOR DO/EO/US Hisao Sato et al.		
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:		
<p>1. <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a submission under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a submission under 35 U.S.C. 371.</p> <p>3. <input checked="" type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371 (f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2))</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau). b. <input checked="" type="checkbox"/> has been communicated by the International Bureau. c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US). <p>6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2))</p> <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> is attached hereto. b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4). <p>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))</p> <ul style="list-style-type: none"> a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau). b. <input type="checkbox"/> have been communicated by the International Bureau. c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. d. <input type="checkbox"/> have not been made and will not be made. <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)).</p> <p>9. <input checked="" type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).</p> <p>10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).</p>		
Items 11 to 20 below concern document(s) or information included:		
<p>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input checked="" type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input type="checkbox"/> A preliminary amendment.</p> <p>14. <input checked="" type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</p> <p>15. <input type="checkbox"/> A substitute specification.</p> <p>16. <input type="checkbox"/> A power of attorney and/or change of address letter.</p> <p>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.</p> <p>18. <input type="checkbox"/> A second copy of the published International Application under 35 U.S.C. 154(d)(4).</p> <p>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</p> <p>20. <input checked="" type="checkbox"/> Other items or information: Return Receipt Postcard; International Search Report; Written Opinion; Copy of PCT Request; Form PCT/RO/105; Form PCT/IB/301</p>		

22511

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U.S. APPLICATION NO. (if known, see 37 CFR 1.5)		INTERNATIONAL APPLICATION NO. PCT/JP2004/005475		ATTORNEY'S DOCKET NUMBER 08228/068001																															
21. The following fees are submitted:																																			
<input checked="" type="checkbox"/>	a) Basic national fee	\$300.00	<input type="checkbox"/>	\$ 300.00																															
<input checked="" type="checkbox"/>	b) Examination fee	\$200.00	<input type="checkbox"/>	\$ 200.00																															
<input checked="" type="checkbox"/>	c) Search fee	\$500.00	<input type="checkbox"/>	\$ 500.00																															
TOTAL OF ABOVE CALCULATIONS =			\$1000.00	<input type="checkbox"/>	\$ 1,000.00																														
<input type="checkbox"/> Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.																																			
Total Sheets	Extra sheets	Number of each additional 50 or fraction thereof (round up to a whole number)	RATE																																
19 - 100 =	/50 =		x \$250.00																																
Surcharge of \$130.00 for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)).																																			
<table border="1"> <thead> <tr> <th>CLAIMS</th> <th>NUMBER FILED</th> <th>NUMBER EXTRA</th> <th>RATE</th> <th colspan="2"></th> </tr> </thead> <tbody> <tr> <td>Total claims</td> <td>8 - 20 =</td> <td></td> <td>x</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td>Independent claims</td> <td>1 - 3 =</td> <td></td> <td>x</td> <td>\$ 0.00</td> <td></td> </tr> <tr> <td colspan="4">MULTIPLE DEPENDENT CLAIM(s) (if applicable)</td> <td>+ 360.00</td> <td>\$ 360.00</td> </tr> <tr> <td colspan="4">TOTAL OF ABOVE CALCULATIONS =</td> <td colspan="2">\$ 1,360.00</td> </tr> </tbody> </table>						CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE			Total claims	8 - 20 =		x	\$ 0.00		Independent claims	1 - 3 =		x	\$ 0.00		MULTIPLE DEPENDENT CLAIM(s) (if applicable)				+ 360.00	\$ 360.00	TOTAL OF ABOVE CALCULATIONS =				\$ 1,360.00	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE																																
Total claims	8 - 20 =		x	\$ 0.00																															
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MULTIPLE DEPENDENT CLAIM(s) (if applicable)				+ 360.00	\$ 360.00																														
TOTAL OF ABOVE CALCULATIONS =				\$ 1,360.00																															
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½.																																			
SUBTOTAL = \$ 1,360.00																																			
Processing fee of \$130.00 for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).																																			
TOTAL NATIONAL FEE = \$ 1,360.00																																			
Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property																																			
TOTAL FEES ENCLOSED = \$ 1,400.00																																			
<table border="1"> <tr> <td>Amount to be refunded:</td> <td>\$</td> </tr> <tr> <td>Amount to be charged:</td> <td>\$</td> </tr> </table>						Amount to be refunded:	\$	Amount to be charged:	\$																										
Amount to be refunded:	\$																																		
Amount to be charged:	\$																																		
a. <input type="checkbox"/> A check in the amount of \$ _____ to cover the above fees is enclosed.																																			
b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.																																			
c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. 50-0591. A duplicate copy of this sheet is enclosed.																																			
d. <input checked="" type="checkbox"/> Fees are to be charged to a credit card. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																																			
NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the International Application to pending status.																																			
SEND ALL CORRESPONDENCE TO: 																																			
SIGNATURE: Jonathan P. Osha																																			
NAME																																			
CUSTOMER NUMBER: 22511 REGISTRATION NUMBER: 33,986																																			

10/518148

DT Sec'd PCT/PTO 17 DEC 2004

PTO/SB/17 (12-04)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL For FY 2005

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 1,400.00)
Complete if Known

Application Number	Not Yet Assigned
Filing Date	Concurrently Herewith
First Named Inventor	Hisao Sato
Examiner Name	Not Yet Assigned
Art Unit	N/A
Attorney Docket No.	08228/068001

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 50-0591 Deposit Account Name: Osha & May L.L.P.

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES**Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent 50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100

Multiple dependent claims 360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	
				Fee (\$)	Fee Paid (\$)
8 - 20 =	x	=			
Indep. Claims 1 - 3 =	x	=			

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
19 - 100 =	/50	(round up to a whole number) x	=	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

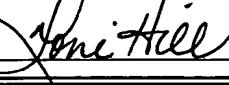
Other: 1631 Basic National Stage fee	300.00
1632 National Stage search fee	500.00
1633 National Stage examination fee	200.00
8021 National Stage recording each patent assignment, agreement or other ...	40.00
1616 National Stage claims - multiple dependent	360.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	33,986	Telephone	(713) 228-8600
Name (Print/Type)	Jonathan P. Osha		Date	December 17, 2004	

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV576720448US, in an envelope addressed to: MS PCT, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: December 17, 2004

Signature:  (Toni A. Hill)

22551

10/518148

DT12 Rec'd PCT/PTO 17 DEC 2004

Application No. (if known):

Attorney Docket No.: 08228/068001

Certificate of Express Mailing Under 37 CFR 1.10

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Date



Signature

Toni A. Hill

Typed or printed name of person signing Certificate

Registration Number, if applicable

713-228-8600
Telephone Number

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Fee Transmittal (2 pages)
Application Data Sheet
Return Receipt Postcard; International Search Report; Written Opinion;
Copy of PCT Request; Form PCT/RO/105; Form PCT/IB/301
English language translation of the International application
Oath or declaration of the inventor(s)
Transmittal Letter to the United States Designated-Elected Office (2
pages)
Assignment
Information Disclosure Statement
IDS Citation by Applicant (12 references)
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Charge \$1,400.00 to credit card